

**MINUTES OF THE  
IDAHO STATE BOARD OF PHARMACY  
NOVEMBER 17, 2011**

**CONFERENCE CALL  
BOARD OFFICE, BOISE, IDAHO**

This meeting of the Board is held to conduct regular Board business.

Chairman Richard de Blaquiere, Pharm D, called the meeting to order on November 17, 2011 at 8:56 a.m.

In attendance via teleconference: Board members Richard de Blaquiere, Pharm D; Nicole Chopski, Pharm D; and Holly Henggeler, Pharm D; and Mark Johnston, R.Ph, Executive Director.

In attendance at Board Office: Board member Berk Fraser, R.Ph; Jan Atkinson, Senior Compliance Officer; Ellen Mitchell, Licensing Coordinator; Fred Collings, Chief Investigator, and Wendy Hatten.

Dr. de Blaquiere proposed that the current policy regarding provisional technician registrations be amended by removing the requirement that a pharmacist in charge can only request a provisional if he or she has less than six (6) technicians. The board is in agreement. Further discussion followed regarding concerns over the length of time that it is taking to register pharmacy technicians due to the fingerprinting process. The Board decided to table further discussion until the next regularly scheduled Board meeting.

Mr. Johnston lead the agenda item entitled Rules Review, specifically regarding public comment from the Board of Medicine. After much discussion, the Board approved, via unanimous consent, the following additions to the draft and directed Mr. Johnston and Ms. Berggren to update as such and submit to the Department of Administration for printing in the January 2012 Idaho Administrative Bulletin, thus creating pending rules to be heard by the 2012 Idaho legislature:

To rule 10.24: the definition of DTM-Drug Therapy Management:

- The addition of the phrase “pursuant to a collaborative practice agreement”.

To rule 011.09: the definition of Pharmaceutical Care Services:

-“Nothing in these rules allows a pharmacist to diagnose, prescribe, order lab tests or conduct complete physical exams beyond what is statutorily allowed or allowed by a collaborative practice agreement.”

“including the performance of health screening activities that may include, but are not limited to, obtaining finger-stick blood samples” is added to 09.a.

-The words “or treatment” to be struck from 09.b.

-The word “drug” to be added in front of the word “therapy” in 09.c.

-The words “to other care providers” to be struck from 09.f.

To rule 320: Pharmacist Independent Practice:

- The words “and MTM” to be added before the word “outside”.

In addition to changes to 11.09.a, the Board’s decisions differed from the Board of Medicine’s request in that:

-The word “complete” was added before the words “physical examination” in the definition of pharmaceutical care, as the Board was concerned with the Board of Medicine’s proposed language restricting accepted actions such as taking temperatures and blood pressures.

-The words “pharmaceutical care services” was not struck from rule 320, as the additions to 11.09 establish demarcation lines that render this change unneeded. Additionally, this proposal would eliminate practices that the Board of Medicine is not concerned with, such as the practice of telepharmacy across state lines from a secured business location that is not a registered drug outlet.

Mr. Johnston presented on the need to update the Board’s policy on changes pharmacists may make to schedule II prescriptions, pursuant to recent DEA action. After much discussion, the Board, via unanimous consent, decided upon changes that formulated the following policy, to be published in the December Newsletter:

The Idaho State Board of Pharmacy supports a recent Drug Enforcement Administration (DEA) statement whereby a pharmacist may use his or her professional judgment in addressing a prescription drug order for a Schedule II controlled substance that is incomplete or deemed incorrect, pursuant to the following Board policy. A pharmacist may change or add dosage form, drug strength, drug quantity, and directions for use (including directed dates within multiple Schedule II prescription drug orders) only after consultation with and agreement of the prescribing practitioner. After consultation with and agreement of the prescribing practitioner, a pharmacist may also add a missing date or change an obvious prescribing practitioner’s error when writing the date, such as the prior year when a new year has just begun, but a date may never be changed to circumvent an expiration date. Without consultation with prescribing practitioner, the patient’s name may be corrected but not changed or added and the patient’s address may be changed or added. Additionally, a prescribing practitioner’s DEA registration number may be added to a prescription drug order after consulting the prescribing practitioner or verifying the number from another reliable source. The drug name must never be changed. Required information may appear on the front or back of the prescription drug order and computer generated data on the prescription drug order satisfies these requirements.

Mr. Fraser motioned to adjourn. Dr. Henggeler seconded. The motion passed unanimously. Meeting adjourned at 10:23 a.m.

\_\_\_\_\_  
Chairman

\_\_\_\_\_  
Vice-Chairman

\_\_\_\_\_  
Member

\_\_\_\_\_  
Member

\_\_\_\_\_  
Member

\_\_\_\_\_  
Executive Director